

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	<i>Abel</i>		02-22-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>T. H.</i>	<i>5C 844</i>	<i>10 3-9-01</i> <i>04/05/01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 - Restricted O Objected

Claim	Date
Final	
Original	
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If more than 150 claims or 10 actions
staple additional sheet here

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